Goddard Space Flight Center **Security Work Request**



PLEASE NOTE: For Center Grand Master Keys, attach Key or Keycard Request Form (GSFC 24-12 or GSFC 24-12a). Keys required for rekeyed areas/rooms may be issued at the time of the rekeying – Contact Key control at 301-286-3425. If you have any questions or if you have a specific request you wish to discuss, please contact the Security Office at 301-286-SAFE (7233). DO NOT use this form to request individual keys/keycards.

			Requester I	Information			
1. Name:			2. Building:	3. Room:	4. Code:	5. Phone:	
6. Cost Center:		7. WBS Element:		8. Fund Center:		9. Fund:	
			Worksite Ir	nformation			
10. Building/Area:		11. Room(s):		12. Date of Request: 13. Desired Com		Completion Date:	
14. Type of Work Requested:		Lock Installation Lock/Safe Repair Safe Combo Change		Area Rekey (attach GSFC 24-12) Electronic Security Installation Electronic Security Repair			
Description of Work:							
Justification:							
Approval Level Instructions							
3. Required approval f and rekeying reques4. Required approval f5. Required approval f access, disabilities,	sts. for keycard for all requ	d installations. ests involving " _l	public"	closet req 8. Required requests.	uests.		ion rooms/telephone of Center Master Key
Approvals							
Approval Levels	Code	Phone	Typed Na	ame	S	ignature	Date
1. Branch Head							
2. Division Chief							
3. FOM							
4. Building Manager							
Special Approvals							
Approval Levels	Typed Name			Signature			Date
5. Code 250							
6. Chief, Code 220							
7. Chief, Code 700							
8. Director, Code 200			Coording Offi	oo Hoo Oist	,		
Assigned To: Date:							
Locksmith(s) Electronic Shop Other:							Date.
Printed Name: Signature:							Completion Date: